

# King County Regional Health Improvement Work Group Meeting Summary

## October 15, 2015, 12:00 – 2:00 pm

### ATTENDANCE

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<input checked="" type="checkbox"/> Sarah Addison – Sea Mar CHC	<input checked="" type="checkbox"/> Daniel Gross – Northwest Health Law Advocates
<input checked="" type="checkbox"/> Gloria Albetta – Public Health-Seattle & King County	<input type="checkbox"/> Kristine Lee – Amerigroup WA
<input checked="" type="checkbox"/> Susan Amberson – Neighborcare	<input checked="" type="checkbox"/> Cheryl Markham – King County DCHS
<input checked="" type="checkbox"/> Erica Azcueta – City of Auburn	<input checked="" type="checkbox"/> Laurie McVay – Public Health-Seattle & King County
<input checked="" type="checkbox"/> Tizzy Bennett – Seattle Children’s Hospital	<input checked="" type="checkbox"/> Lena Nachand – WA Health Care Authority
<input checked="" type="checkbox"/> Lois Bernstein – MultiCare	<input type="checkbox"/> Mary Shaw – United Way
<input checked="" type="checkbox"/> Alaric Bien – City of Redmond	<input checked="" type="checkbox"/> Aren Sparck – Seattle Indian Health Board
<input checked="" type="checkbox"/> Lydia Chwastiak – UW/Harborview	<input checked="" type="checkbox"/> Kim Tully – Solid Ground
<input checked="" type="checkbox"/> Shelley Cooper-Ashford – Center for MultiCultural Health	<input checked="" type="checkbox"/> Janna Wilson – Public Health-Seattle & King County
<input type="checkbox"/> Federico Cruz-Urbe – Sea Mar CHC	<input checked="" type="checkbox"/> Andrea Yip – Aging & Disability, City of Seattle
	<input checked="" type="checkbox"/> Wendy Watanabe – Watanabe Consultation

### KEY POINTS & DECISIONS

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#### WELCOME & INTRODUCTION

- Gloria welcomed six new people in the room: Aren Sparck, Shelley Cooper-Ashford, Lois Bernstein, Wendy Watanabe, Daniel Gross and Lena Nachand

#### OBJECTIVES & AGENDA REVIEW

- Kim reviewed the meeting objectives, which included:
  - To review and provide initial feedback on a proposed outline and framework for a King County regional health improvement plan.
  - Identify next steps and what to bring to the ACH Interim Leadership Council (ILC) by when.

#### RELEVANT UPDATES FROM THE ACH ILC

- Janna let the group know that at its September meeting, the ACH ILC acknowledged they would not be able to complete their work by December and have agreed to meet into 2016.
- The RHIP Work Group agreed to continue their work into 2016 as well. Laurie McVay will send an invite.

#### RHIP OUTLINE & FRAMEWORK REVIEW

- The co-chairs and RHIP staff proposed that the group consider using the *Culture of Health Action Framework*, developed by the Robert Wood Johnson Foundation.
- Wendy Watanabe was introduced; she is a consultant on the ACH team and agreed to facilitate today’s discussion. Wendy is also working with the ACH consumer/community voice ad hoc work group, which has a particular interest in community voice in the RHIP development
- Janna walked through the *Outline of a King County Regional Health Improvement Plan (version 1.0)* which included the RWJF framework for action. She explained that this was completely up for discussion and might not work, but was designed to get the conversation started. The framework seems to have synergy with the King County transformation vision and the action areas seem to track with existing initiatives in the King County region. She explained that the intent would not be to supersede or replace other plans, but rather use this as way to explain the ACH’s priorities within a larger context.

- Attendees were split into three discussion groups to share comments and critiques of the outline and framework for action.

#### **GROUP DISCUSSION DEBRIEF**

- All 3 discussion groups had largely positive reactions to proposing use of RWJ Framework as a structure for the King County RHIP; some found the synching up with a national framework appealing and liked how it included actions both in the care delivery realm as well as the community focus
- Suggestion made to play with graphic to see more interconnectedness among Areas 1,2,3, and 4
- Framework should be non-linear/organic
- Several suggested that Action Area 1, “making health a shared value” be modified in some way to incorporate equity (e.g, “making equity and health a shared value.”)
- Suggestion to add “Public Will” to Action Area #1
- Finance and sustainability is key —some felt the RHIP should include a section on that and address it; it’s a key piece and an area of open concern and many questions. If not part of the RHIP, where would that be articulated? It was noted the ACH sustainability work group hasn’t yet convened.
- If the RHIP articulates a set of ACH priorities, it also should be clear about criteria by which they were selected. Be clearer about how the RHIP relates to ACH “project selection” – is it the place where priority projects are articulated? Or a tool to help with that?
- Clarity is necessary around language and terms, words may mean different things to different sectors
- Measures should capture integration of services and improved access
- Include a commitment to close the equity gaps
- Make framework as concrete as possible

#### **NEXT STEPS**

- Schedule RHIP meetings for January to June, 2016
- Incorporate feedback into framework document for further review and discussion at the RHIP November meeting
- Explore getting on the agenda of the December or January ACH-ILC meeting to present and get feedback on the draft outline. If they support it, then further work could occur to flesh it out. Janna will follow up around agenda-setting with the ACH Steering Committee.
- Discussion occurred about the nature and timing of getting more consumer engagement into the RHIP work – if the plan is setting priorities, important not to get too far down the line without consumer/community input. It was also noted that there are various avenues for input, and that many of the initiatives that are reflected in the action framework have community and consumer voices as part of them. Can we build on these existing avenues.
- Some members said they would begin floating this draft RHIP outline with their networks to get reactions, and could bring insights back to the next RHP meeting To continue the discussion about consumer input, staff said they would call a meeting of the consumer/community voice ad hoc work group.

### **Next Meeting: November 19, 12:00 – 2:00 pm.**

Please email [hhstransformation@kingcounty.gov](mailto:hhstransformation@kingcounty.gov) if you are unable to attend.

Light refreshments will be served.